

UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF MICHIGAN**FILED - GR**

December 21, 2023 1:07 PM

CLERK OF COURT

U.S. DISTRICT COURT

WESTERN DISTRICT OF MICHIGAN

BY: KB SCANNED BY: KB/12/21**1:23-cv-1337**Paul L. Maloney- U.S. District Judge
Ray Kent - Magistrate JudgeFREDERICK L. MORRIS 162928

(Enter above the full name of the plaintiff(s), including prisoner number, in this action. If you cannot list all plaintiffs in the space provided, please write "see attached" and list all names on an additional page.)

v.

DR ROBERT CRAMPTON MD.NIKKI MONROE RNJACK BELLINGER RN 13

(Enter above the full name of the defendant(s) in this action. If you cannot list all defendants in the space provided, please write "see attached" and list all names on an additional page.)

COMPLAINT

(Print Clearly)

I. Previous Lawsuits

CAUTION: The Prison Litigation Reform Act has resulted in substantial changes in the ability of incarcerated individuals to initiate lawsuits in federal courts without prepayment of the civil action filing fee. Accurate and complete responses are required concerning your litigation history. Generally, a plaintiff's failure to accurately and completely answer the questions set forth below will result in denial of the privilege of proceeding *in forma pauperis* and require you to pay the entire \$402.00 filing fee regardless of whether your complaint is dismissed.

- A. Have you ever filed a lawsuit while incarcerated or detained in any prison or jail facility? Yes ☐ No ☒
- B. If your answer to question A was yes, for each lawsuit you have filed you must answer questions 1 through 5 below. Attach additional sheets as necessary to answer questions 1 through 5 below with regard to each lawsuit.
1. Identify the court in which the lawsuit was filed. If it was a state court, identify the county in which the suit was filed. If the lawsuit was filed in federal court, identify the district within which the lawsuit was filed.

 2. Is the action still pending? Yes ☐ No ☒
 - a. If your answer was no, state precisely how the action was resolved: _____
 3. Did you appeal the decision? Yes ☐ No ☒
 4. Is the appeal still pending? Yes ☐ No ☒
 - a. If not pending, what was the decision on appeal? _____
 5. Was the previous lawsuit based upon the same or similar facts asserted in this lawsuit? Yes ☐ No ☐
 - a. If so, explain: _____

II. Parties

A. Plaintiff(s)

Enter your name, place of confinement, address, and place of confinement during the events described in the complaint in the blanks below. Provide the same information for any additional plaintiffs. Attach extra sheets as necessary.

Name of Plaintiff FREDERICK L. MORRIS 162928
 Place of Present Confinement OAKS CORRECTIONAL Facility
 Address 1500 CABARFEA Hwy, MANISTEE MI. 49660
 Place of Confinement During Events Described in Complaint OAKS CORRECTIONAL Facility

B. Defendant(s)

Complete the information requested below for each defendant in this action, including whether you are suing each defendant in an official and/or personal capacity. Provide the same information for each additional defendant. If there are more than six defendants attach extra sheets as necessary.

Name of Defendant #1 DR Robert Crompton
 Position or Title PRISON Doctor
 Place of Employment OAKS CORRECTIONAL Facility,
 Address 1500 CABARFEA Hwy, MANISTEE MI. 49660
 Official and/or personal capacity? Both

Name of Defendant #2 NIKKI MONROE
 Position or Title RN Health Unit Manager
 Place of Employment OAKS CORRECTIONAL Facility
 Address 1500 CABARFEA Hwy MANISTEE MI. 49660
 Official and/or personal capacity? Both

Name of Defendant #3 JACK Bellinger RN13
 Position or Title Health Service Supervisor
 Place of Employment OAKS CORRECTIONAL Facility
 Address 1500 CABARFEA Hwy. MANISTEE MI. 49660
 Official and/or personal capacity? Both

Name of Defendant #4 _____
 Position or Title _____
 Place of Employment _____
 Address _____
 Official and/or personal capacity? _____

Name of Defendant #5 _____
 Position or Title _____
 Place of Employment _____
 Address _____
 Official and/or personal capacity? _____

III. Statement of Claim

Page 1

State here the **facts** of your case. Describe how each defendant is personally involved. Include also the names of other persons involved, dates and places. **Do not give any legal arguments or cite any cases or statutes.** If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. **Do not include unrelated claims.** Use as much space as you need. Attach extra sheets if necessary.

ISSUE I: DR Robert Crompton Knew or Should have Known, that Prolong USE of Doxycycline without Periodical examination, Could AND Would cause Autointoxication. Due to DR Robert Crompton deliberate indifference to my health, my immune system was Compromised by A Prolonged unsupervised dosage of Doxycycline, Twice daily of 100mg. Bactera was Allowed to Build up in my system unchecked AND this became apparent when I became sick with Nausea, Vomiting, Diarrhea AND delirium. The PA, Amanda Mattison Serio discontinued this Doxycycline when she came to see me for this sickness, stating I had been on that medication for way too long, 10 days later Dr Robert Crompton came to see me and said it should work its way out I was on this Doxycycline From 3-15-22 to 11-3-23.

ISSUE II: Deliberate indifference on behalf of Nikki Monroe RN Health Unit Manager, and Jack Bellingher RNIB Nursing Supervisor. Lack of concern to procure a replacement CPAP Headgear mask and Hose, That had been lost or misplaced for 3 months from CRT Weiss. As a direct result of this deliberate indifference to my serious to my medical needs in procuring this much needed equipment, I recycled this harmful Bactera for months. Causing Days and Night of sickness from Diarrhea, Vomiting, Nausea and delirium.

Next page.

III. Statement of Claim

PAGE 2

State here the **facts** of your case. Describe how each defendant is personally involved. Include also the names of other persons involved, dates and places. **Do not give any legal arguments or cite any cases or statutes.** If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. **Do not include unrelated claims.** Use as much space as you need. Attach extra sheets if necessary.

Which CAUSED me to WARE Adult diapers, Vomiting lost of sleep for nights. my CPAP could Not do the Job it WAS designed to do with a BAD MASK and Hose. At Night it would keep constant pressure and fill my stomic with Air full of Recycled Bacteria. This kept me sick and delirious to the point that I fell in the presence of C/o Night as he was passing out food trays, injuring my left KNEE. leaving A large lump on my left leg. I was given No appointment to see DR for this injury.

ISSUE III: Because health CARE personnel Refused to provide me with Requested Antibacterial Soap to keep MASK and Hose clean, Further percpitated my Sickness by build up of Bacteria in my BAD Soiled MASK AND Hose.

ISSUE IV: Delay in getting Medical treatment for for Severe Knee injury that occurred AS A Direct Result of Auto intoxication Sickness.

ISSUE V: Above named defendant's Wilfully AND maliciously discriminated against me in direct Violation of my Civil Rights By Failing to take Such steps AS may be necessary to ensure that no individual with A disability is excluded, Denied services, Segregated or otherwise treated differently than other Individual Because of the Absence of Auxiliary Aids AND Services.

IV. Relief

State briefly and precisely what you want the court to do for you.

ORDER: Change in policy dealing with medical equipment. ORDER: access to supplies for cleaning equipment. ORDER: more supervision in medication that has side effects
Jury Trial
ORDER: Pain and suffering AND Punitive Damages of \$500,000⁰⁰

V. Notice to Plaintiff Regarding Consent

In accordance with the provisions of 28 U.S.C. § 636(c) and Federal Rule of Civil Procedure 73, you are hereby notified that the United States magistrate judges of this district court may, upon your consent, conduct any or all proceedings in this case, including a jury trial and entry of a final judgment. If you consent, any appeal from a judgment entered by a magistrate judge shall be taken directly to the United States Court of Appeals for this judicial circuit in the same manner as an appeal from any other judgment of a district court.

Magistrate judges have greater flexibility in their schedules than district judges, who have heavy criminal caseloads that take priority over civil trials. Accordingly, the magistrate judges are generally able to schedule prisoner civil rights cases for jury trial much sooner, and they are able to provide firm trial dates. Magistrate judges are experienced trial judges who handle a great number of prisoner civil rights cases.

Your decision to consent to the dispositive jurisdiction of a United States magistrate is entirely voluntary. If you do not consent to a magistrate judge, the case will be randomly assigned to a district judge. The magistrate judge already assigned to this case would continue to decide all pretrial matters and would handle all dispositive motions by report and recommendation.

Please check **ONE** box below to indicate whether you voluntarily consent to proceed with a United States magistrate judge or if you would instead prefer that the case be assigned to a district judge.

☐ I hereby voluntarily consent to the United States magistrate judge conducting all proceedings in this case, including entry of a final judgment and all post-judgment matters.

☒ I request that this case be assigned to a district judge.

12-20-23
Date


Signature of Plaintiff

NOTICE TO PLAINTIFF(S)

The failure of a *pro se* litigant to keep the court apprised of an address change may be considered cause for dismissal.

FREDERICK L. MORRIS
162928

OAKS CORR Facility

1500 CABARFAE Hwy.

MANISTEE Mi.

49660-9200

U.S. District
Western District
OFFICE

399 Federal
110 Michigan

GRAND RAPIDS



US POSTAGE[®] PITNEY BOWES

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